# MDPCP Year 2 Summary

The MDPCP is a voluntary program open to all qualifying Maryland primary care providers that provides funding and support for the delivery of advanced primary care throughout the state. The MDPCP supports the overall health care transformation process and allows primary care providers to play an increased role in prevention, management of chronic disease, and preventing unnecessary hospital utilization.

476 Primary Care Practices	~2,000 Providers in MDPCP	24 Care Transformation Organizations
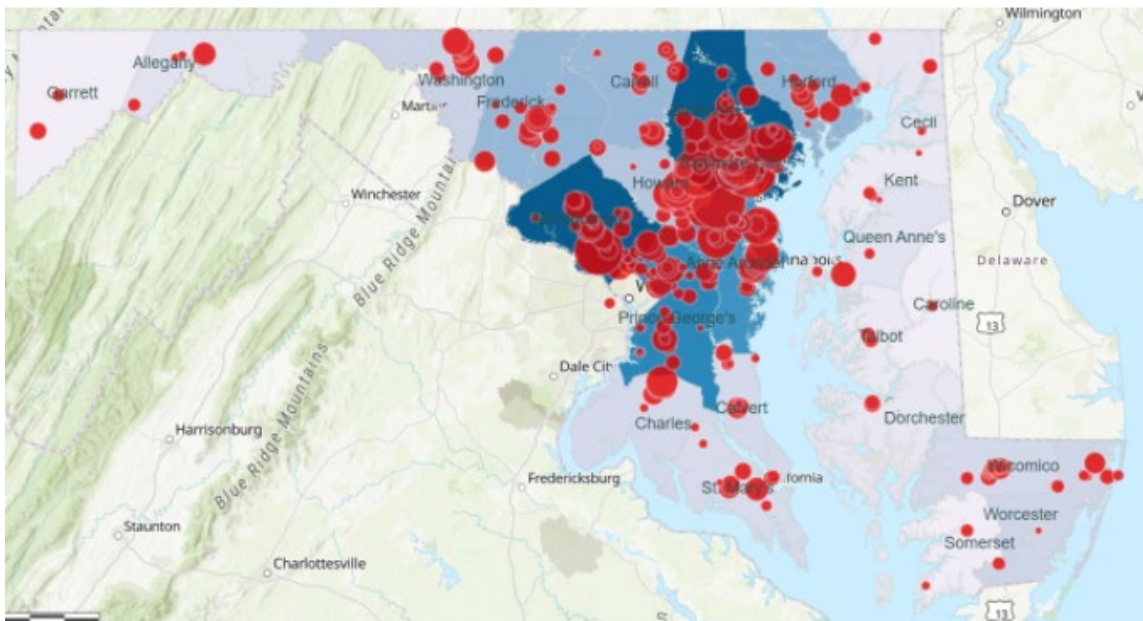
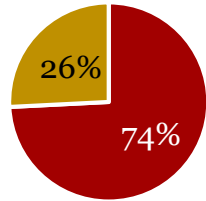| ~356,000 Medicare FFS Beneficiaries	~45,000 Dual-Eligible Beneficiaries	Over 2,700,000 Patients Served

MDPCP is a statewide primary care network and includes practices in every county in the state.

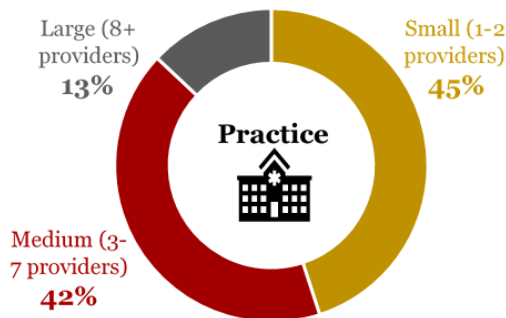| **Practice Characteristics**	**Participant Characteristics**

Practice Tracks

- Track 1 — 74%
- Track 2 — 26%

Race

- Black — 22%
- White — 71%
- Other — 7%

Practices Partnered with a CTO

- Non-CTO — 23%
- CTO — 77%

Age of Beneficiaries

- 64 and younger — 10%
- 65 to 69 — 21%
- 70 to 74 — 26%
- 75 to 79 — 19%
- 80 to 84 — 12%
- 85 and Older — 12%

Practice

- Small (1-2 providers) **45%**
- Medium (3-7 providers) **42%**
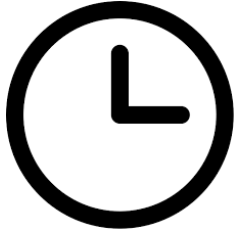- Large (8+ providers) **13%**
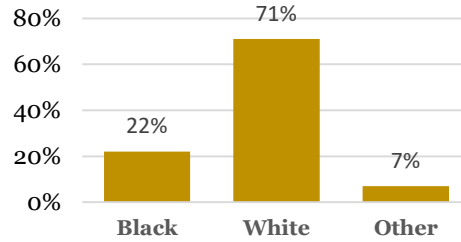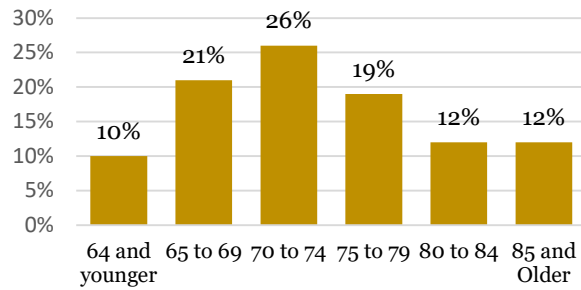
Beneficiaries Dually Eligible for Medicare and Medicaid
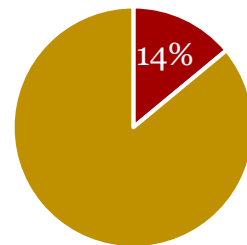
- Dual-Beneficiaries — 14%

Accomplishment 1: Improved Performance on Transformation Outcomes

Expanded Access to Services

77% of practices always or often offered extended hours, representing a 13% increase from 2019.

99% of practices are using telehealth with a 57% increase since the start of the program.

Utilization Outcomes

MDPCP Practice beneficiaries had lower IP admissions and readmissions than beneficiaries in non-participating practices.

IP Admissions per K Trend

ER Visits per K Trend
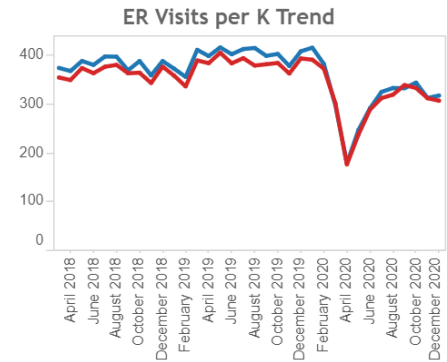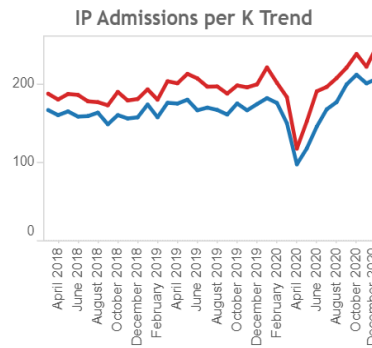
The blue line represents MDPCP participants and the red line reflect non-participating Medicare FFS beneficiaries. *Note: These patterns are not adjusted for risk levels.*

PQI-Like Events per K

MDPCP practice beneficiaries had lower ambulatory sensitive admissions and ER visits than beneficiaries in non-participating practices.

— MDPCP Participants   — Non-MDPCP Participants
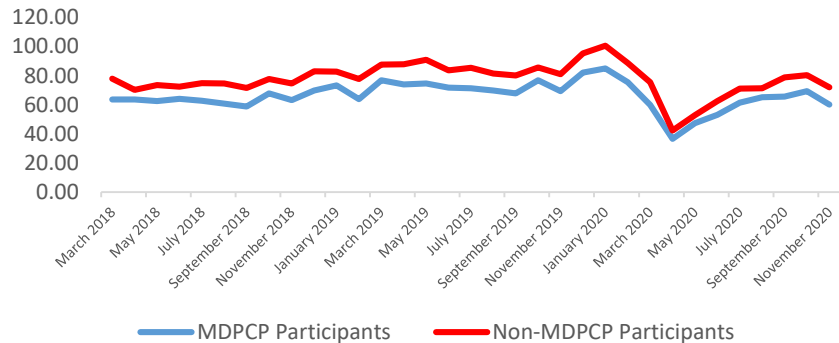
31 New Practices implemented SBIRT during 2020, representing a 21% increase despite the pandemic.

Accomplishment 2: Expanded Reach of Program

The number of MDPCP practices increased by **25%**, adding 94 new practices.
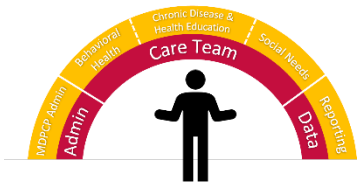
To spread the word about MDPCP:

- Conducted Outreach webinars.
- Empowered CTOs to do marketing / outreach events.

MDPCP issued an RFA to add Federally Qualified Health Centers to the program.

[Milbank Memorial Fund](#) and [JAMA Health Forum](#) published articles highlighting MDPCP's model.

MDPCP expanded [its network of Community-based partnerships](#) covering social needs, chronic disease, and behavioral health.

NEW PARTNERSHIP MDPCP began collaborating with CareFirst to reach more practices and expand learning.

Accomplishment 3: Improved Education Offerings

Hosted several trainings last year, including:

- 2 cohorts of staff academies *to train staff in advanced primary care*
- An in-person 8-hour learning session
- A virtual 5-hour learning session
- Affinity groups for care management and pharmacy roles
- Over 30 Webinars
- 3 learning events in collaboration with CareFirst.

MDPCP Webinars had up to **96** attendees, and averaged **48** attendees.

MDPCP employed 8 full-time staff practice coaches to help practices improve outcomes.
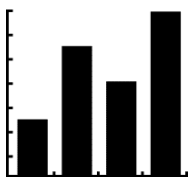
Coaches created tools and resources for practices to help them understand their gaps and improve.

Coaches trained practices on new CRISP tools to help practices identify areas of opportunity.

With coach support, 8̲5̲ practices transitioned to Track 2.

Accomplishment 4: COVID-19 Education and Support

MDPCP provided practices crucial guidance on responding to Covid-19, as was highlighted by [Millbank Quarterly](#).

 MDPCP provided practices telehealth transition resource guides.

 MDPCP hosted 74 webinars to keep practices informed on the latest COVID-19 updates throughout 2020.

PRIMARY CARE ROADMAP TO RECOVERY

COVID-19 TESTING GUIDELINES

Maryland

MDPCP created testing, treatment and vaccine guidance documents for Maryland primary care practices.

 CRISP offered tools for testing and monoclonal antibody treatment referral.